



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2011

1. Corporate ID No. 000028288

2. Name of Corporation FRIENDS OF THE NORTH SMITHFIELD PUBLIC LIBRARY

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 20 MAIN STREET

P.O. BOX 950

City or Town: SLATERSVILLE

State: RI

Zip: 02876 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

FUNDRAISING ACTIVITIES AND P.R. FOR LIBRARY EVENTS.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JENNIFER MEDEIROS	117 BLACK PLAIN RD N. SMITHFIELD, RI 02896 USA
TREASURER	CATHERINE R. HALL	1445 PROVIDENCE PIKE NORTH SMITHFIELD, RI 02896 US
DIRECTOR	LYNN O'DONNELL	52 POMONA STREET NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	JOANNE PETERSON	63 POMONA ST. NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	SHARON COURNOYER	89 FARIVIEW AVE. NORTH SMITHFIELD, RI 02896 US

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

CAROL H. BROUWER MAIN STREET P.O. BOX 950 SLATERSVILLE , RI 02876

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.

Signed this 14 Day of June, 2011 at 12:45:16 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By CATHERINE R. HALL

Signature of Officer of the Corporation

☐ President or ☐ Vice President or ☐ Secretary or ☐ Assistant Secretary or

☒ Treasurer or ☐ Receiver or ☐ Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631
Revised 09/07

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